

MAR 20 2006

IPLM Group, P.A.
P.O. Box 18455
Minneapolis, MN 55418
612-331-7400 telephone
612-331-7401 facsimile

PATENT

FACSIMILE TRANSMITTAL LETTER


Mail Stop: Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

TOTAL NO. OF PAGES: 17
Sent to Facsimile No.: 571-273-8300
Examiner Phone No.: (571)272-4881

| | | | |
|---|--------------------------------------|-----------|------------------|
| In re Application of: | William Blake Kolb | | |
| Serial No.: | 10/810,065 | Examiner: | Kenneth Rinehart |
| Confirmation No.: | 3514 | Art Unit: | 3749 |
| Filed: | March 26, 2004 | | |
| For: | DRY CONVERTING PROCESS AND APPARATUS | | |
| We are transmitting the following documents: Facsimile Transmittal Letter [1 page] Fee Transmittal for FY 2005 [1 page] Amendment [15 pages] | | | |

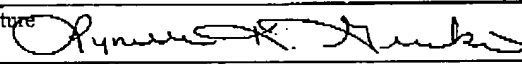
Please charge Deposit Account 13-3723 for any fees under 37 CFR §1.16 and §1.17 that may be required during the pendency of this application. This authorization includes the fee for any extension of time under 37 CFR §1.136(a) that may be necessary. To the extent any such extension should become necessary it is hereby requested.

Respectfully submitted,

| | | |
|----------------------------|-----------------------------|--|
| Registration No. 29,524 | Direct Dial 612-331-7412 |  |
| Date: March 20, 2006 | David R. Cleveland | |

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| To Facsimile Number 571-273-8300 | Signature  |
| Date March 20, 2006 | Printed Name Lynelle K. Grube |

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PTO/SB/17 (12-04)

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| | | | |
|---|--|---|--|
| Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2005 | | Complete If Known Application Number 10/810,065 Filing Date March 26, 2004 First Named Inventor William Blake Kolb Examiner Name Kenneth Rinehart Art Unit 3749 Attorney Docket No. 55752US019 | |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 | | RECEIVED CENTRAL FAX CENTER MAR 20 2006 | |
| TOTAL AMOUNT OF PAYMENT (\$ 200 | | | |

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account - Deposit Account Number: 13-3723 Deposit Account Name: 3M Innovative Properties Co.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

| Application Type | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
| | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | |

2. EXCESS CLAIM FEES

| Fee Description | Fee (\$) | Small Entity Fee (\$) |
|---|----------|-----------------------|
| Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent | 50 | 25 |
| Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent | 200 | 100 |
| Multiple dependent claims | 360 | 180 |

Total Claims 65 - 20 or HP = 4 Extra Claims x 50 = 200 Fee Paid (\$)
 HP = highest number of total claims paid for, if greater than 20
 Indep. Claims 17 - 3 or HP = 0 Extra Claims x = Fee Paid (\$)
 HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets - 100 = Extra Sheets / 50 = Number of each additional 50 or fraction thereof x Fee (\$)
 Fee Paid (\$)

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: _____

| | | | |
|-------------------|---------------------------|-------------------------|------------------------|
| SUBMITTED BY | | Registration No. 29,524 | Telephone 612-331-7412 |
| Signature | <i>David R. Cleveland</i> | (Attorney/Agent) | |
| Name (Print/Type) | David R. Cleveland | Date | March 20, 2006 |

This collection of information is required by 37 CFR 1.135. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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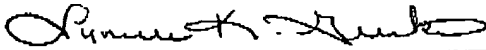
PATENT

Customer Number

Docket No. 55752US019

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

| | | | |
|-----------------------|--------------------------------------|-----------|------------------|
| In re Application of: | William Blake Kolb | | |
| Serial No.: | 10/810,065 | Examiner: | Kenneth Rinehart |
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| Date of Transmission: March 20, 2006 | Printed Name Lynelle K. Grube |

AMENDMENT

Mail Stop: Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Introductory Comments

This is in reply to the Office Action mailed January 9, 2006. Please amend the application as follows:

03/21/2006 HVUONG1 00000093 133723 10810065

01 FC:1202 200.00 DA

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